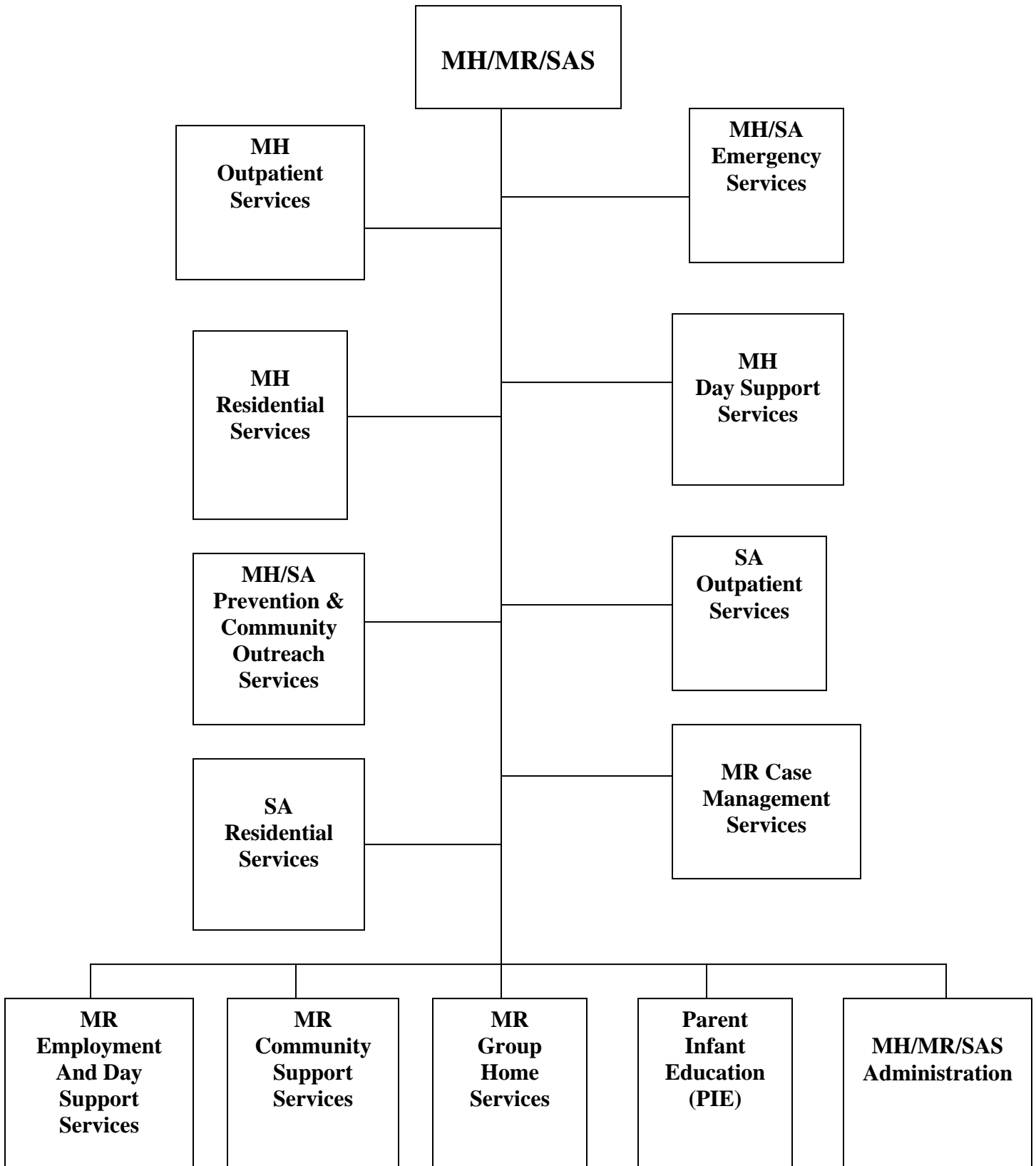


**Mental Health, Mental Retardation, and
Substance Abuse Services (MH/MR/SAS)**



Mental Health, Mental Retardation, and Substance Abuse Services

MISSION

The mission of the County's Community Services Board, through the Department of Mental Health/Mental Retardation/Substance Abuse Services, is to prevent or minimize the effects of mental illness, mental retardation and substance abuse, and to enhance the quality of life of County residents affected by these conditions.

DESCRIPTION

As mandated by Chapter 10, §37.1 of the Code of Virginia, the Community Services Board, an eighteen member volunteer board, appointed by the Board of Supervisors, operating as the Loudoun County Department of MHMRSAS, is responsible for the public mental health, mental retardation and substance abuse services system. The department provides a wide variety of services for citizens of all ages to stabilize acute situations and to enable people with mental disabilities to live independently and successfully in the community. Services are interrelated and designed to address unique needs of clients in each of the three aforementioned disability areas and to respond to State and Federal mandates and local policy. In addition, the department reaches residents serviced by other agencies through its collaboration with the Adult Detention Center, the Juvenile Detention Center, the Youth Shelter, the School System, Courts, Probation and Parole, Community Corrections, Child Protective Services, Adult Protective Services, Victim Witness and the Loudoun Hospital emergency rooms.

The department's programs are: mental health outpatient services, mental health/substance abuse emergency services, mental health residential, mental health day support services, mental health/substance abuse outreach and prevention services, substance abuse outpatient services, substance abuse residential services, mental retardation case management services, mental retardation employment and day support services, mental retardation community support services, mental retardation group home services, a parent infant education program, and administration.

BUDGET OVERVIEW

FY 07 Issues, Challenges & Trends:

- Service demand continues to increase with population growth.
- Affordable supervised housing for residents with disabilities remains in short supply.
- Lack of sufficient slots in the Medicaid Home and Community Based Waiver (Medicaid Waiver) program for residents with mental retardation limits services.
- State funding restrictions for services to individuals in identified priority populations have become more stringent, causing reduced local flexibility and additional administrative overhead.
- State government has accelerated efforts to discharge residents of hospitals and training centers to local communities.
- Growing proportions of residents requiring services are underinsured or uninsured.
- Adult psychiatric bed capacity in Northern Virginia has been reduced in the past year as private hospitals have closed beds. Beds for committed adults in urgent crisis are especially difficult to find.
- Proposed Federal Medicaid budget cuts threaten revenues.
- The department employs manual paper record keeping and administrative processes that inhibit productivity.

FY 07 Major Goals:

- The department will strive to maintain waiting time for Mental Health and Substance Abuse Outpatient services to 30 days or less.
- More efficient service delivery by outreach staff will be created through more effective deployment of County vehicles.
- The automation of administrative tasks will increase staff productivity.
- Implementation of the new client computer system will significantly enhance record-keeping and efficiency.
- A focus on bi-lingual initiative will improve the County's overall service delivery to those from whom English is a second language.

FY 06 Major Achievements:

- The Brambleton Intermediate Care Facility and the Stone Ridge Group Homes are licensed and opened.
- A third after-school apartment based substance abuse and gang prevention program for at risk children and adolescents is implemented.
- Capacity and utility of current information system will be enhanced by the implementation of a data warehouse.
- Relocation of the Eastern Loudoun Mental Health Center has resulted in improved community accessibility and service capacity.
- Telecommuting capacity for 10 community based outreach staff reduces the need for county funded office space and increase service efficiency.
- Vocational services for five additional recent disabled graduates of Loudoun public schools is provided.

Mental Health, Mental Retardation, and Substance Abuse Services

Department Financial Summary

Departmental Financial Summary	FY 03 Actual	FY 04 Actual	FY 05 Actual	FY 06 Adopted	FY 07 Adopted
Expenditures					
Personnel	\$15,288,231	\$15,937,019	\$17,784,326	\$21,682,000	\$23,582,000
Operations & Maintenance	3,565,216	3,770,610	4,027,187	5,026,000	4,802,000
Capital Outlay	5,319	0	0	61,000	0
Central Vehicle Fund	14,999	0	131,864	0	0
Total Expenditures:	\$18,873,765	\$19,707,629	\$21,943,377	\$26,769,000	\$28,384,000
Revenue					
Local Fees, Charges, Etc	\$3,735,681	\$3,869,828	\$3,939,216	\$5,053,000	\$5,359,000
Commonwealth	2,035,100	2,124,828	2,459,537	2,210,000	2,242,000
Federal	1,271,824	1,055,689	696,124	723,000	663,000
Total Revenues:	\$7,042,605	\$7,050,345	\$7,094,877	\$7,986,000	\$8,264,000
Federal Foster Care Reimbursement¹	N/A	\$16,693	\$27,804	\$0	\$0
Local Tax Funding:	\$11,831,160	\$12,640,591	\$14,820,696	\$18,783,000	\$20,120,000
FTE Summary:	281.34	284.34	324.83	341.30	344.64

¹See page XXX for information on the Federal Foster Care Reimbursement Fund.

FY 07 Board Action: The FY 07 Adopted Fiscal Plan for Mental Health, Mental Retardation, and Substance Abuse Services includes enhancements totaling 6.27 FTE and \$98,000 in additional local tax funding for clinicians, a program manager and administrative staff in the MH Day Support and MH Residential Services Intensive Community Team program and a bilingual program coordinator. During FY 06, 1.93 FTE was transferred to Parks, Recreation & Community Services and County Administration, 1.00 FTE was added for the Medicaid-funded Community Access Program and 2.00 FTE associated with expired grants were deleted. The FY 07 budget also includes funding for implementation of compensation increases and increased benefits costs effective September 2006. Funds were also authorized for replacement of the MR/MH/SAS client computer system. This system is included in the Nondepartmental Budget on page 425.

Additional information on this department's Capital Improvements Program projects can be found in Volume 2 on pages 521, 522, 523, 524, 525, 526, 527, 528, and 531. Information on scheduled projects for the Capital Asset Preservation Fund can be found in tables in Volume 2 beginning on page 606.

Budget History:

FY 03: The Board added 12.00 FTE: 2.00 PIE Therapists, 8.00 FTE for the Revenue Maximization Adolescent Day Treatment Plan, 1.00 FTE Scott Sells Program Manager, and 1.00 FTE Specialist for At-Risk Children.

FY 03 Mid-year: Three Utilization Management Utilization Review positions were transferred to Social Services for the Comprehensive Services Act program.

FY 04: The Board added 6.00 FTE to provide for client support.

FY 04 Mid-year: Mid-year FY 04 enhancements added 18.80 FTE funded by Medicaid for MH group homes, Friendship House, early CAP, in home support, Family Connections, and 3.00 FTE Federal Foster Care Reimbursement positions moved to Social Services.

FY 05: The Board of Supervisors added 25.69 FTE for contracting the Stone Ridge group home, two MH group homes, MR Group Employment, MR Job Link, and MH/SA Outpatient Services.

FY 05 Mid-year: 3.00 FTE were added in mid-FY 05 for Medicaid, the Tobacco Settlement, and the State Mental Health Initiative. The FY 05 budget also reflects the transfer of 2.00 FTE to the Sheriff's Office and General Services in mid-FY 05.

FY 06: The Board of Supervisors added 16.00 FTE for establishment of the Drug Court and expanded services in In-Home Support, Prevention, Substance Abuse, Adult Detention, and Mental Health.

Mental Health, Mental Retardation, and Substance Abuse Services

Expenditures by Program

Programs	FY 03 Actual	FY 04 Actual	FY 05 Actual	FY 06 Adopted	FY 07 Adopted
Mental Health Outpatient	\$2,399,802	\$2,372,380	\$2,700,009	\$2,934,000	\$3,266,000
MH/Substance Abuse Emergency Services	798,550	834,175	822,250	1,092,000	1,043,000
Mental Health Residential	3,488,739	3,683,480	4,548,809	5,499,000	6,068,000
Mental Health Day Support	515,271	516,171	683,537	700,000	926,000
MH/Substance Abuse Outreach/Prevention	317,722	340,162	382,448	535,000	550,000
Substance Abuse Outpatient Services	1,319,228	1,638,234	1,741,833	1,967,000	1,979,000
Substance Abuse Residential Services	42,967	68,925	33,670	105,000	211,000
Mental Retardation Case Management	442,558	463,256	528,229	638,000	699,000
Mental Retardation Employment/Day Support	1,985,752	2,089,042	2,447,727	3,390,000	3,040,000
Mental Retardation Community Support	599,573	512,946	594,944	1,034,000	896,000
Mental Retardation Group Homes	2,797,552	3,012,785	3,372,489	4,448,000	4,633,000
Parent Infant Education Program	754,664	888,307	949,406	1,194,000	1,348,000
Administration	3,411,387	3,287,766	3,138,026	3,233,000	3,725,000
Total	\$18,873,765	\$19,707,629	\$21,943,377	\$26,769,000	\$28,384,000

Revenues by Program

Programs	FY 03 Actual	FY 04 Actual	FY 05 Actual	FY 06 Adopted	FY 07 Adopted
Mental Health Outpatient	\$851,360	\$620,119	\$746,934	\$756,000	\$733,000
MH/Substance Abuse Emergency Services	906,068	915,716	917,638	911,000	929,000
Mental Health Residential	1,087,922	1,118,613	1,213,746	1,287,000	1,418,000
Mental Health Day Support	160,362	155,707	246,223	160,000	409,000
MH/Substance Abuse Outreach/Prevention	108,202	100,710	96,700	97,000	97,000
Substance Abuse Outpatient Services	863,458	1,030,742	1,052,802	848,000	935,000
Substance Abuse Residential Services	29,435	44,241	33,670	50,000	59,000
Mental Retardation Case Management	169,168	228,484	261,542	286,000	339,000
Mental Retardation Employment/Day Support	179,623	235,729	260,455	222,000	281,000
Mental Retardation Community Support	241,481	210,464	185,334	412,000	188,000
Mental Retardation Group Homes	1,678,980	1,744,814	1,798,052	2,551,000	2,410,000
Parent Infant Education Program	355,055	461,177	308,585	406,000	466,000
Administration	411,491	200,522	1,000	0	0
Total	\$7,042,605	\$7,067,038	\$7,122,681	\$7,986,000	\$8,264,000

Mental Health, Mental Retardation, and Substance Abuse Services

Local Tax Funding by Program

Programs	FY 03 Actual	FY 04 Actual	FY 05 Actual	FY 06 Adopted	FY 07 Adopted
Mental Health Outpatient	\$1,548,442	\$1,752,261	\$1,953,075	\$2,178,000	\$2,533,000
MH/Substance Abuse Emergency Services	(107,518)	(81,541)	(95,388)	181,000	114,000
Mental Health Residential	2,400,817	2,564,867	3,335,063	4,212,000	4,650,000
Mental Health Day Support Services	354,909	360,464	437,314	540,000	517,000
MH/Substance Abuse Outreach/Prevention	209,520	239,452	285,748	438,000	453,000
Substance Abuse Outpatient Services	455,770	607,492	689,031	1,119,000	1,044,000
Substance Abuse Residential Services	13,532	24,684	0	55,000	152,000
Mental Retardation Case Management	273,390	234,772	266,687	352,000	360,000
Mental Retardation Employment/Day Support	1,806,129	1,853,313	2,187,272	3,168,000	2,759,000
Mental Retardation Community Support	358,092	302,482	409,610	622,000	708,000
Mental Retardation Group Homes	1,118,572	1,267,971	1,574,437	1,897,000	2,223,000
Parent Infant Education Program	399,609	427,130	640,821	788,000	882,000
Administration	<u>2,999,896</u>	<u>3,087,244</u>	<u>3,137,026</u>	<u>3,233,000</u>	<u>3,725,000</u>
Total	\$11,831,160	\$12,640,591	\$14,820,696	\$18,783,000	\$20,120,000

Staffing by Program

Programs	FY 03 Actual	FY 04 Actual	FY 05 Actual	FY 06 Adopted	FY 07 Adopted
Mental Health Outpatient	31.00	29.48	30.00	32.47	33.47
MH/Substance Abuse Emergency Services	9.72	9.72	9.72	11.72	9.72
Mental Health Residential	47.83	61.55	79.92	84.92	86.39
Mental Health Day Support Services	8.60	8.13	11.07	11.07	14.07
MH/Substance Abuse Outreach/Prevention	5.00	5.00	5.00	7.00	7.00
Substance Abuse Outpatient Services	22.67	21.67	23.67	25.20	24.20
Substance Abuse Residential Services	0.00	0.00	0.00	0.00	1.00
Mental Retardation Case Management	7.00	7.00	7.00	8.50	8.50
Mental Retardation Employment/Day Support	20.32	20.79	25.65	23.65	23.65
Mental Retardation Community Support	22.09	10.89	8.00	14.50	12.50
Mental Retardation Group Homes	46.79	47.79	60.48	62.85	60.92
Parent Infant Education Program	10.00	11.00	13.00	14.00	14.00
Administration	<u>50.32</u>	<u>51.32</u>	<u>51.32</u>	<u>45.42</u>	<u>49.22</u>
Total	281.34	284.34	324.83	341.30	344.64

MH/MR/SAS - Mental Health Outpatient Services

DESCRIPTION

Mental Health Outpatient Services include assessment, evaluation, referral, case management, medication evaluation, medication management, discharge planning, crisis intervention, and psychotherapy services. Treatment services are provided through individual, couple, family, group, and intensive in-home therapy. The client population is diverse, encompassing people affected by serious mental illness or emotional disturbance, youth at risk for serious emotional disturbance, victims of trauma, people suffering from mental illness in combination with substance abuse, and those experiencing severely debilitating emotional and/or situational problems. Client needs are often intensive and require coordination with multiple community agencies to provide effective care. Treatment services are also provided as components of other County programs, e.g. evaluation and treatment at the Youth Shelter. Staff participate in regional and State workgroups to maximize services and resources across localities. Employee Assistance Program (EAP) services, i.e. assessment and referral, are also provided to County government employees and their families.

BUDGET OVERVIEW

FY 07 Issues:

- The public sector is the only resource for the uninsured and medically indigent.
- The increasing diversity of the County population requires broader cultural competency and variety of language abilities.
- Pressures toward census reduction in State psychiatric facilities and the closing of psychiatric beds in regional private psychiatric hospitals increase the need for immediate pre-discharge planning and intensive community-based services.
- Demand for mental health evaluation and treatment will increase as a result of the larger inmate population at the new Adult Detention Center.
- All Loudoun County Courts rely upon forensic mental health services for prompt evaluations and recommendations for judicial decision-making. Referrals are expected to increase with the addition of a new judge.
- Four weeks plus wait time for psychiatric medication services prolongs symptomatology and diminishes effectiveness of other immediate treatment services.
- Demand continues to increase for special referrals to mental health services from other County agencies.

FY 07 Challenges:

- Staff will strive to implement service efficiencies while not compromising quality of care.
- Providing services in a timely manner while negotiating the regulatory and eligibility demands of entitlement and insurance coverage continues to be an issue.
- Staff who have competency in languages other than English are needed.
- Shorter lengths of stay in psychiatric hospitals will be achieved by more provision of more intensive mental health services.
- Access to medication from multiple sources will need to be coordinated.
- Growth in the population served will continue to put pressure on the ability to provide psychiatric evaluations in a timely manner.
- The opening of the new Adult Detention Center will require the provision of additional mental health services.
- The department is increasingly called on to provide forensic evaluations within the required timeframes.
- Priority referrals from other County agencies must be responded to promptly.

Program Financial Summary	FY 03 Actual	FY 04 Actual	FY 05 Actual	FY 06 Adopted	FY 07 Adopted
Expenditures					
Personnel	\$1,918,173	\$1,858,353	\$2,133,794	\$2,419,000	\$2,680,000
Operations & Maintenance	481,629	514,027	566,215	515,000	586,000
Total Expenditures:	\$2,399,802	\$2,372,380	\$2,700,009	\$2,934,000	\$3,266,000
Revenue					
Local Fees, Charges, Etc	\$507,388	\$473,414	\$522,833	\$578,000	\$578,000
Commonwealth	56,708	68,045	172,441	135,000	135,000
Federal	287,264	78,660	51,660	43,000	20,000
Total Revenues:	\$851,360	\$620,119	\$746,934	\$756,000	\$733,000
Local Tax Funding:	\$1,548,442	\$1,752,261	\$1,953,075	\$2,178,000	\$2,533,000
FTE Summary:	31.00	29.48	30.00	32.47	33.47

MH/MR/SAS - Mental Health Outpatient Services

Planned Accomplishments/Objectives for FY 07

Goal: Provide effective and timely mental health services to children, adolescents and their families.

Objective: Reduce waiting times (30 days for psychotherapy/14 days for medication services) and demonstrate improvement in functioning in 75% of consumers served.

<i>Performance Measures</i>	Actual FY 04	Actual FY 05	Est. FY 06	Proj. FY 07
# of children and adolescents receiving mental health outpatient services	623	611	640	640
% of children and adolescents whose functioning has improved, as measured by comparative Global Assessment of Functioning	N/A	65%	67%	69%
% of children who are scheduled for intake within 30 days of request for service	N/A	90%	92%	95%
# of children and adolescents receiving psychiatric medication services	244	191	235	245
% of children and adolescents receiving psychiatric medication services within two weeks of referral	N/A	21%	20%	20%

Goal: Provide effective and timely mental health services to adults and their families.

Objective: Reduce waiting times (30 days for psychotherapy/14 days for medication services) and demonstrate improvement in functioning in 75% of consumers served.

<i>Performance Measures</i>	Actual FY 04	Actual FY 05	Est. FY 06	Proj. FY 07
# of adults receiving mental health outpatient services	1,871	1,887	1,900	1,900
% of adults whose functioning has improved, as measured by comparative Global Assessment of Functioning	N/A	66%	68%	70%
% of adults who are scheduled for intake within 30 days of request for service	N/A	81%	85%	87%
% of adults who are scheduled for aftercare within seven days of discharge from psychiatric hospitals	80%	76%	80%	80%
# of adults receiving psychiatric medication services	957	952	955	960
% of adults receiving psychiatric medication services within two weeks of referral	N/A	21%	20%	20%

Goal: Provide effective and timely forensic mental health services for the criminal justice system including all Loudoun County Courts and the Adult Detention Center.

Objective: Comply with all court orders and Adult Detention Center referrals for forensic and other mental health and substance abuse comprehensive services.

<i>Performance Measures</i>	Actual FY 04	Actual FY 05	Est. FY 06	Proj. FY 07
# of court-ordered evaluations	186	229	235	250
% of forensic evaluations completed by initial due dates	89%	82%	90%	85%
# of inmates receiving MH services at the Adult Detention Center	90	90	150	250

MH/MR/SAS - Mental Health/Substance Abuse Emergency Services

DESCRIPTION

Emergency Services (ES) is State-mandated (VA Code 37.2-500) as a Core Service of the Community Services Board. Immediate clinical services are provided to individuals/families experiencing psychiatric and/or substance abuse distress. Services are provided in person and by telephone. After-hours, weekend, and holiday service is accessed through an answering service, with the ES Clinician receiving the call within five minutes and immediately responding. In addition, ES provides assessment and consultation services at the two Loudoun Hospital Emergency Rooms, the Adult and Juvenile Detention Centers, and the Youth Shelter. The Loudoun County Public School system also depends on ES for immediate evaluations of students believed to be at risk to themselves or others.

ES facilitates admission to State and local hospitals, provides State mandated pre-screening evaluations of individuals involved in civil commitment processes, and provides substance abuse evaluation for detoxification services. ES is a participant in Loudoun County's Critical Incident Stress Management Team (CISM) providing mental health assistance and consultation to Public Safety personnel. Staff also use the CISM model to reach other community groups that are experiencing a sudden and devastating event. ES frequently provides consultation and training to other community agencies upon request. Additionally, ES maintains membership on the Loudoun County Sheriff Department and Leesburg Police Crisis Negotiations Teams and responds on-site to hostage/barricade situations.

BUDGET OVERVIEW

FY 07 Issues:

- There has been a marked decrease in regional psychiatric in-patient capacity, precipitated by the closing of three hospital psychiatric units within the last year with a loss of 51 adult beds. Current regional psychiatric bed availability for juveniles is limited to one hospital. Both juveniles and adults are increasingly admitted to facilities outside the region, because a regional bed could not be accessed.
- There are increased requests for emergency services.
- An increasing number of traumatic community events require immediate responses.

FY 07 Challenges:

- Locating available hospital beds within the Northern Virginia region continues to be a problem. This is especially critical for individuals who meet Temporary Detention criteria due to risk to self/others and/or substantial inability to care for self by reason of mental illness or substance abuse.
- Continuing to respond to requests for emergency services within 5 minutes is an issue with the growth of those needing the service.
- Providing timely CISM services following a traumatic with existing resources is an issue.

Program Financial Summary	FY 03 Actual	FY 04 Actual	FY 05 Actual	FY 06 Adopted	FY 07 Adopted
Expenditures					
Personnel	\$597,603	\$594,507	\$660,090	\$805,000	\$780,000
Operations & Maintenance	200,947	239,667	162,160	287,000	263,000
Total Expenditures:	\$798,550	\$834,174	\$822,250	\$1,092,000	\$1,043,000
Revenue					
Local Fees, Charges, Etc	\$56,207	\$38,902	\$32,828	\$51,000	\$33,000
Commonwealth	849,861	876,814	880,910	860,000	896,000
Federal	0	0	3,900	0	0
Total Revenues:	\$906,068	\$915,716	\$917,638	\$911,000	\$929,000
Local Tax Funding:	(\$107,518)	(\$81,542)	(\$95,388)	\$181,000	\$114,000
FTE Summary:	9.72	9.72	9.72	11.72	9.72

MH/MR/SAS - Mental Health/Substance Abuse Emergency Services

Planned Accomplishments/Objectives for FY 07

Goal: Maintain effective mental health and substance abuse emergency services.

Objective: Provide response to requests for emergency services within 5 minutes.

<i>Performance Measures</i>	Actual FY 04	Actual FY 05	Est. FY 06	Proj. FY 07
# of emergency clients	1,850	2,177	2,285	2,300
% of requests for emergency services responded to by phone within 5 minutes	93%	93%	95%	95%

Goal: Mitigate consequences of stress reactions of public safety personnel and community members through provision of Critical Incident Stress Management (CISM) model services following a traumatic event.

Objective: Respond to 100% of requests for CISM.

<i>Performance Measures</i>	Actual FY 04	Actual FY 05	Est. FY 06	Proj. FY 07
# of Critical Incident Stress Management (CISM) debriefings and defusings conducted/number of requests	16/16	45/45	45/45	45/45

MH/MR/SAS - Mental Health Residential Services

DESCRIPTION

Mental Health Residential Services are provided in group homes, supervised apartments and in private residences. Services are provided to individuals and their families who are experiencing serious mental illness, mental retardation and co-occurring mental illness and retardation. Services include intensive psychotherapy, psychiatric and nursing care, medication management, case management, as well as life skills such as money management, personal hygiene, cooking and housekeeping. Direct supervision of clients, transportation and crisis intervention are also provided. The program is available 24-hours a day through on-site supervision and on-call staff. Outreach services are also provided to homeless people and home bound elderly with serious mental illness.

BUDGET OVERVIEW

FY 07 Issues:

- Average time on the waiting list for Mental Health Residential Services continues to be 2 years because of rapidly increasing demand.
- Increased number of home-bound senior mental health clients receives inadequate medical care.
- The highly competitive housing market limits opportunities for purchase of townhouses approved by Board of Supervisors.

FY 07 Challenges:

- Assuring sufficient housing and effective services for persons on the waiting list with increasingly complex needs continues to be a problem. The proposed budget includes funding for a position to provide services to seriously ill homeless persons.
- The availability of medical care for home-bound elderly mental health patients will be maximized.
- Completing the purchase of approved townhouses will be done.

Program Financial Summary	FY 03 Actual	FY 04 Actual	FY 05 Actual	FY 06 Adopted	FY 07 Adopted
Expenditures					
Personnel	\$3,282,736	\$3,382,577	\$4,180,719	\$5,162,000	\$5,682,000
Operations & Maintenance	206,003	300,903	343,322	337,000	386,000
Capital Outlay	0	0	24,768	0	0
Total Expenditures:	\$3,488,739	\$3,683,480	\$4,548,809	\$5,499,000	\$6,068,000
Revenue					
Local Fees, Charges, Etc	\$834,883	\$865,574	\$799,873	\$1,034,000	\$1,165,000
Commonwealth	253,039	253,039	413,873	253,000	253,000
Total Revenues:	\$1,087,922	\$1,118,613	\$1,213,746	\$1,287,000	\$1,418,000
Local Tax Funding:	\$2,400,817	\$2,564,867	\$3,335,063	\$4,212,000	\$4,650,000
FTE Summary:	47.83	61.55	79.92	84.92	86.39

MH/MR/SAS - Mental Health Residential Services

Planned Accomplishments/Objectives for FY 07

Goal: Maintain clients with serious mental illnesses in the least restrictive environment.

Objective: Provide community housing and supportive services to all applicants.

<i>Performance Measures</i>	Actual FY 04	Actual FY 05	Est. FY 06	Proj. FY 07
# of clients/family members served	88/70	84/90	90/92	99/93
% of MH Residential clients who have successfully maintained housing and avoided long-term, psychiatric re-hospitalization (15 or more days per year)	100%	97%	95%	95%
# of people on the waiting list	45	44	46	40

Goal: Reduce the effects of mental illness and substance abuse for home-bound elderly citizens.

Objective: Through evaluation and referral, provide appropriate mental health and substance abuse services in the least restrictive environment. Complete assessments within two weeks of request.

<i>Performance Measures</i>	Actual FY 04	Actual FY 05	Est. FY 06	Proj. FY 07
# of clients served by the Elderly Outreach Program	N/A	14	25	25
% of Elderly Outreach clients referred to Mental Health or other human services	N/A	100%	95%	95%
#/% of assessments performed within 2 weeks of request	N/A	14/100%	23/90%	23/95%

Goal: Reduce the effect of mental illness and substance abuse upon homeless seriously mentally ill persons.

Objective: Increase the number and percentage of homeless residents contacted by the PATH Team.

<i>Performance Measures</i>	Actual FY 04	Actual FY 05	Est. FY 06	Proj. FY 07
# of homeless seriously mentally ill persons receiving Project for Assistance and Transition from Homelessness (PATH) services	129	155	170	190
# of PATH clients connected to mental health or other human services	38	60	70	76
% of requests for PATH services received from the police and shelters that are responded to within 48 hours	25%	80%	60%	75%

MH/MR/SAS - Mental Health Day Support Services

DESCRIPTION

This program provides individualized supportive and rehabilitative services in a day-support/clubhouse setting (Friendship House). Services include: life skills training, community integration activities, vocational assessment and training, job placement, medication monitoring, and family support and education. Other services provided include: case management, advocacy, individual and group therapy, transportation, and crisis intervention.

BUDGET OVERVIEW

FY 07 Issues:

- Residents with serious mental illness require fewer hospitalizations and have better outcomes when they receive effective day support services.
- Too few residents with serious mental illness are enrolled in day support.

FY 07 Challenges:

- Providing support, social, and vocational services to greater numbers of residents with mental illness will continue to be addressed. The proposed budget includes 3.00 FTE to expand services at Friendship House.

Program Financial Summary	FY 03 Actual	FY 04 Actual	FY 05 Actual	FY 06 Adopted	FY 07 Adopted
Expenditures					
Personnel	\$428,000	\$472,017	\$602,710	\$647,000	\$852,000
Operations & Maintenance	87,271	44,154	80,827	53,000	74,000
Total Expenditures:	\$515,271	\$516,171	\$683,537	\$700,000	\$926,000
Revenue					
Local Fees, Charges, Etc	\$160,362	\$155,707	\$246,223	\$160,000	\$409,000
Total Revenues:	\$160,362	\$155,707	\$246,223	\$160,000	\$409,000
Local Tax Funding:	\$354,909	\$360,464	\$437,314	\$540,000	\$517,000
FTE Summary:	8.60	8.13	11.07	11.07	14.07

MH/MR/SAS - Mental Health Day Support Services

Planned Accomplishments/Objectives for FY 07

Goal: Reduce the effects of serious mental illness.

Objective: Increase vocational success and community participation by citizens with mental illness. Increase number served and timely service access.

<i>Performance Measures</i>	Actual FY 04	Actual FY 05	Est. FY 06	Proj. FY 07
# clients/family members served	109/65	103/75	105/75	105/80
% of intakes completed within one week of request for service	N/A	95%	95%	95%
# of clients who are enrolled in the vocational program	21	25	30	40
% of clients enrolled in the vocational program who obtain employment within 12 months of enrollment	85%	90%	88%	80%
% clients satisfied with the services received	100%	95%	95%	95%

Goal: Improve family understanding of serious mental illness.

Objective: Provide psycho-educational groups and family involvement opportunities.

<i>Performance Measures</i>	Actual FY 04	Actual FY 05	Est. FY 06	Proj. FY 07
# of family members who complete the program orientation	N/A	25	40	30
# of family members who participate in psycho-educational groups	N/A	25	35	50

MH/MR/SAS - MH/SA Prevention & Community Outreach Services

DESCRIPTION

Prevention and Community Outreach Services focuses on high-risk children, adolescents and their families. At the request of schools, community organizations, businesses, civic groups, and public agencies, Prevention and Community Outreach Services provides substance abuse, gang and violence prevention programs. School-based programs, such as the Conflict Mediation Program and the Gang Prevention Program, are collaborative efforts with Loudoun County Public Schools. Prevention and Community Outreach Services also provides After-School Prevention Programs. These services provide a place for youth to receive help with their homework, participate in prevention groups, and take part in community service projects. Prevention staff also represent the Loudoun County Community Services Board on numerous community coalitions dedicated to mental health education and prevention of substance abuse and other high-risk behavior by youth.

BUDGET OVERVIEW

FY 07 Issues:

- Increases in the number of at-risk youth in schools and community and subsequent increase in substance abuse, gang involvement and bullying.
- The increasing diversity of the County population requires broader cultural competency and variety of language abilities.
- Lack of access for at-risk youth and their families to after school programs results in vulnerability to substance abuse and gang activity.

FY 07 Challenges:

- Meeting the documented need for services in the schools and in the community for at-risk youth in the areas of substance abuse, gang involvement and bullying will be addressed.
- The department will continue to meet the special needs of diverse populations with different cultures and languages through training of existing staff and hiring of bilingual staff.
- Space within apartment complexes that request after school programs will be acquired.
- Assuring prevention services through the development of a comprehensive system of services and collaborating with other service agencies will continue.

Program Financial Summary	FY 03 Actual	FY 04 Actual	FY 05 Actual	FY 06 Adopted	FY 07 Adopted
Expenditures					
Personnel	\$278,162	\$304,423	\$335,057	\$459,000	\$471,000
Operations & Maintenance	39,560	35,739	47,391	55,000	79,000
Capital Outlay	0	0	0	21,000	0
Total Expenditures:	\$317,722	\$340,162	\$382,448	\$535,000	\$550,000
Revenue					
Local Fees, Charges, Etc	\$2	\$10	\$0	\$0	\$0
Federal	108,200	100,700	96,700	97,000	97,000
Total Revenues:	\$108,202	\$100,710	\$96,700	\$97,000	\$97,000
Local Tax Funding:	\$209,520	\$239,452	\$285,748	\$438,000	\$453,000
FTE Summary:	5.00	5.00	5.00	7.00	7.00

MH/MR/SAS - MH/SA Prevention & Community Outreach Services

Planned Accomplishments/Objectives for FY 07

Goal: Reduce violence, gang involvement, and bullying among at-risk youth in Loudoun County.

Objective: Provide evidence-based substance abuse, violence, gang and bullying prevention programs to at-risk youth in the schools and in the community.

<i>Performance Measures</i>	Actual FY 04	Actual FY 05	Est. FY 06	Proj. FY 07
# of youth served in the schools	1,520	1,751	1,820	1,500 ²
# of youth served in the community	124	172 ¹	180	180
% of youth whose grades maintained or improved	57%	98%	98%	98%

¹ Increase in youth served due to one-year VA Tobacco Settlement Foundation grant.

² Decrease in large assemblies and classroom activities, relates to decrease in youth served, level of service increases through additional small, evidence-based groups.

Goal: Facilitate achievement of developmental goals by at-risk youth.

Objective: Provide comprehensive case management services in order to connect youth and families with needed human, health and other social services.

<i>Performance Measures</i>	Actual FY 04	Actual FY 05	Est. FY 06	Proj. FY 07
# of youth receiving case management services	60	75	90	90
# of family members receiving case management services	240	300	360	360
# of youth participating in alternative activities, e.g., camps and educational activities	63	80	100	100

MH/MR/SAS - Substance Abuse Outpatient Services

DESCRIPTION

Substance Abuse Outpatient Services (SA) include evaluation, referral, case management, psychiatric and psychotherapy services. Treatment is provided through individual, group, couples and family therapy, as well as education through participation in self-help groups such as Alcoholics Anonymous, Narcotics Anonymous and Al-Anon. Treatment promotes family involvement because substance abuse is devastating to the individual and to the abuser's family. In order to maximize resources and accessibility, SA services are provided at both Mental Health Centers, as well as at the Adult Detention Center (ADC), the Work Release Center, the Juvenile Detention Center (JDC), the Community Corrections Program (CCP), the Youth Shelter, and Loudoun County Middle and High Schools. Contracted private and public sector providers located outside the County serve individuals who require a more intensive level of care such as detoxification and inpatient/residential treatment.

BUDGET OVERVIEW

FY 07 Issues:

- Loudoun County's continual population increase is reflected in the growth of public schools and an increase in requests for services for students and families.
- Unstable funding from the Federal government in support of the High Intensity Drug Trafficking Area (HIDTA) program threatens to undermine the Department's ability to respond to the needs of substance abusers involved in the criminal justice system.
- The increasing diversity of the County population requires broader cultural competency and variety of language abilities among service providers.

FY 07 Challenges:

- The department must increase service efficiencies while not compromising quality of care.
- The growing demand for early intervention, assessment and referral services for students in the schools will be met.
- Effective substance abuse services for adults involved in the criminal justice system will put pressure on existing staff.
- The department will endeavor to recruit and retain staff who have competency in languages other than English.

Program Financial Summary	FY 03 Actual	FY 04 Actual	FY 05 Actual	FY 06 Adopted	FY 07 Adopted
Expenditures					
Personnel	\$1,069,540	\$1,269,772	\$1,312,025	\$1,754,000	\$1,741,000
Operations & Maintenance	249,688	368,462	429,808	213,000	238,000
Total Expenditures:	\$1,319,228	\$1,638,234	\$1,741,833	\$1,967,000	\$1,979,000
Revenue					
Local Fees, Charges, Etc	\$206,240	\$207,677	\$222,632	\$130,000	\$216,000
Commonwealth	429,200	458,995	465,626	450,000	451,000
Federal	228,018	347,377	336,740	268,000	268,000
Total Revenues:	\$863,458	\$1,014,049	\$1,024,998	\$848,000	\$935,000
Federal Foster Care Reimbursement	\$0	\$16,693	\$27,804	\$0	\$0
Local Tax Funding:	\$455,770	\$607,492	\$689,031	\$1,119,000	\$1,044,000
FTE Summary:	22.67	21.67	23.67	25.20	24.20

MH/MR/SAS - Substance Abuse Outpatient Services

Planned Accomplishments/Objectives for FY 07

Goal: Provide effective and timely substance abuse services to children, adolescents and their families.

Objective: Reduce waiting time to 30 days or less and demonstrate initiation of recovery in 75% of consumers served.

<i>Performance Measures</i>	Actual FY 04	Actual FY 05	Est. FY 06	Proj. FY 07
# of children and adolescents receiving substance abuse outpatient services	598	635	674	735
% of children who are scheduled for intake within 30 days of request for service	N/A	91%	95%	95%
% of children and adolescents who were abstinent in the 60 days prior to discharge	N/A	N/A	75%	75%

Goal: Provide effective and timely substance abuse services to adults and their families.

Objective: Reduce waiting time to 30 days or less and demonstrate initiation of recovery in 75% of consumers served.

<i>Performance Measures</i>	Actual FY 04	Actual FY 05	Est. FY 06	Proj. FY 07
# of adults receiving substance abuse outpatient services	1,204	1,213	1,247	1,306
% of adults who are scheduled for intake within 30 days of request for service	N/A	86%	90%	90%
% of adults who were abstinent in the 60 days prior to discharge	N/A	N/A	75%	75%

Goal: Provide mental health and substance abuse student assistance services including early intervention, evaluation and referral for Loudoun County Schools.

Objective: Achieve a rate of 80% of adolescent/family follow thru on treatment recommendations from SAS.

<i>Performance Measures</i>	Actual FY 04	Actual FY 05	Est. FY 06	Proj. FY 07
# of adolescents receiving Student Assistance Services evaluations	467	466	475	475
% of adolescents/families who followed treatment recommendations from SAS	63%	81%	75%	75%
# of Middle and High Schools receiving at least 3 hours of Student Assistance Services per week/total # of secondary schools	18/20	18/22	18/24	18/24

MH/MR/SAS - Substance Abuse Residential Services

DESCRIPTION

The Inpatient/Residential Treatment Program includes detoxification and residential treatment services that are purchased from private vendors and are supported by Federal, State, and local funds. The Supervised Apartment program serves eight adult substance abuse clients in four apartments. This 9-12 month program provides substance abuse treatment and crisis intervention and intensive case management and community supervision. Program participants are required to attend AA/NA, maintain employment and comply with random drug testing requirements.

BUDGET OVERVIEW

FY 07 Issues:

- Costs for services purchased from private vendors are rising.
- Unstable funding from the Federal government in support of the High Intensity Drug Trafficking Area (HIDTA) program threatens to undermine the Department's ability to provide residential treatment services to substance abusers involved in the criminal justice system.
- Demand for supervised apartment program beds continues to increase as the apartments have become increasingly utilized by Drug Court program clients.

FY 07 Challenges:

- Staff will be pressed to maintain adequate levels of substance abuse residential services for youth and adults in need.
- Utilizing apartment programs beds while identifying and accessing other community housing resources will be an ongoing issue.

Program Financial Summary	FY 03 Actual	FY 04 Actual	FY 05 Actual	FY 06 Adopted	FY 07 Adopted
Expenditures					
Personnel	\$0	\$0	\$22,721	\$0	\$92,000
Operations & Maintenance	42,967	68,925	10,949	105,000	119,000
Total Expenditures:	\$42,967	\$68,925	\$33,670	\$105,000	\$211,000
Revenue					
Local Fees, Charges, Etc	\$5,326	\$7,381	\$56	\$5,000	\$14,000
Federal	24,109	36,860	33,614	45,000	45,000
Total Revenues:	\$29,435	\$44,241	\$33,670	\$50,000	\$59,000
Local Tax Funding:	\$13,532	\$24,684	\$0	\$55,000	\$152,000
FTE Summary:	0.00	0.00	0.00	0.00	1.00

MH/MR/SAS - Substance Abuse Residential Services

Planned Accomplishments/Objectives for FY 07

Goal: Ensure a satisfactory transition from acute addiction to outpatient treatment for chemically dependent children, adolescents, and adults.

Objective: Provide detoxification and inpatient treatment options for clients in need of that level of care.

<i>Performance Measures</i>	Actual FY 04	Actual FY 05	Est. FY 06	Proj. FY 07
# of children and adolescents receiving inpatient treatment services	5	4	5	5
# of adults receiving inpatient treatment services	70	82	75	75
# of inpatient clients successfully transitioning to outpatient treatment services	65	66	60	60
% of inpatient clients successfully transitioning to outpatient treatment services	87%	77%	75%	75%

Goal: Ensure the availability of transitional residential care for chemically dependent persons.

Objective: Provide transitional supervised apartment program services to chemically dependent persons.

<i>Performance Measures</i>	Actual FY 04	Actual FY 05	Est. FY 06	Proj. FY 07
# of persons served in supervised apartment programs for 60 days or more	10	11	12	12
# of persons discharged after 60 or more days	8	5	8	8
# who successfully complete the program (as measured by substance-free living, maintaining employment and 12-step program participation)	7/88%	2/40%	6/75%	6/75%

MH/MR/SAS - MR Case Management Services

DESCRIPTION

Case Management is an intervention process which ensures that service systems and community supports are responsive to the specific, multiple and changing needs of individuals and families. Case Management services ensure that individuals are properly connected to and involved with the appropriate services and supports in order to maximize opportunities for successful community living. Case Managers assist in gaining access to housing and jobs, social service benefits and entitlement programs, therapeutic supports, social and educational resources, and other supports essential to meeting basic needs. Individuals who are recipients of Medicaid benefits receive a full cadre of case management support, such as interdisciplinary team planning, coordination of services, intake and assessments, advocacy and resource planning. Those who do not have Medicaid may also receive the same or similar service coordination based on need. In addition, those who are in need of emergency assistance, pre-admission and pre-discharge planning from state training centers or hospitals, or who are recipients of Medicaid services, are prioritized for case management assistance.

BUDGET OVERVIEW

FY 07 Issues:

- Many of the program's consumers live with aging parents or caregivers who are unable to care for the consumer due to their own physical and/or medical problems. The critical need for alternative living arrangements for individuals with mental retardation will become a paramount concern as these parents become incapable of caring for their children. At the present time, there are limited or no alternatives available.
- The growing population of special education students with mental retardation graduating from the school system needing access to programs to maintain quality life.

FY 07 Challenges:

- The case management program has seen much in the way of growth over the past year. Eighteen (18) new Medicaid Waiver slots were allocated in FY 05.
- Waiting lists continue to increase as new residents enter the County and students graduate from the School System.
- Case management is faced with the challenge of adding more consumers with critical need situations to case loads without compromising the needs of those already receiving services.

Program Financial Summary	FY 03 Actual	FY 04 Actual	FY 05 Actual	FY 06 Adopted	FY 07 Adopted
Expenditures					
Personnel	\$417,877	\$437,405	\$498,326	\$610,000	\$664,000
Operations & Maintenance	\$24,681	\$25,851	29,903	\$28,000	35,000
Total Expenditures:	\$442,558	\$463,256	\$528,229	\$638,000	\$699,000
Revenue					
Local Fees, Charges, Etc	\$169,168	\$228,484	\$261,542	\$286,000	\$339,000
Total Revenues:	\$169,168	\$228,484	\$261,542	\$286,000	\$339,000
Local Tax Funding:	\$273,390	\$234,772	\$266,687	\$352,000	\$360,000
FTE Summary:	7.00	7.00	7.00	8.50	8.50

MH/MR/SAS - MR Case Management Services

Planned Accomplishments/Objectives for FY 07

Goal: Increase availability of case management services to the adult population.

Objective: Case managers will be able to assess 30% of individuals on the program waiting list and put them on appropriate waiting lists for other services.

<i>Performance Measures</i>	Actual FY 04	Actual FY 05	Est. FY 06	Proj. FY 07
# of adults receiving Case Management (CM) services	158	166	182	182
# of adults waiting for service	64	65	60	60
% of people on CM waiting list who are moved to appropriate service specific waiting lists.	N/A	N/A	30%	40%

Goal: Reduce the number of children waiting for case management services.

Objective: Assess children on the waiting list and add them to case loads as openings become available.

<i>Performance Measures</i>	Actual FY 04	Actual FY 05	Est. FY 06	Proj. FY 07
# of children under 18 receiving services	14	14	26	26
# of children under 18 waiting for services	36	46	51	56
Average waiting time	N/A	N/A	1.5 years	2 years

Goal: Families and clients are satisfied with case management services.

Objective: 85% of individuals surveyed report satisfaction with the impact of the program services and, as applicable, in response to case manager intervention to a crisis.

<i>Performance Measures</i>	Actual FY 04	Actual FY 05	Est. FY 06	Proj. FY 07
# of individuals served in case management program	172	180	208	208
% of families/clients satisfied with case management services	N/A	N/A	85%	90%

MH/MR/SAS - MR Employment and Day Support Services

DESCRIPTION

Employment Services and Day Support Services provide a range of support levels to help clients with mental disabilities and mental retardation to retain jobs and provide volunteer services in the community. These programs are operated by a combination of County and contracted services.

Job Link, operated by the MR Division, helps people obtain and retain regular jobs in the community using the individual supported competitive employment model. In this model, vocational specialists provide individual job development, placement, training and limited follow along services. Job Link serves people with mental retardation and/or serious mental illness. For people who need more support in order to work, group or enclave employment service is provided through a contractual arrangement with Every Citizen Has Opportunities (ECHO), Incorporated. ECHO, Inc. contracts with businesses to provide services performed by small groups of clients, under ECHO supervision.

Day Support is provided to more severely disabled clients and involves volunteer activities and other community activities. These services are provided through a contractual arrangement with St. Johns Community Services and through the Community Access Program (CAP), which is operated by the MR Division. CAP services are funded through reimbursement by the Medicaid Waiver program. Some medically fragile clients need a program that focuses more on personal care matters such as range of motion exercises, assistance with eating, sensory stimulation, and nursing services. These specialized day services for the medically fragile are provided through a contractual agreement with ECHO, Inc.

BUDGET OVERVIEW

FY 07 Issues:

- The planning for transition of students from school services to adult services must be made more seamless.
- The Job Link program will maintain compliance with CARF (Commission on Accreditation of Rehabilitation Facilities) accreditation standards. This accreditation was achieved in FY 05 but maintenance of accreditation will require significant further effort.
- The CAP Coordinator manages services for 12 clients and supervises 12 staff and substitutes. Regional standards suggest that the coordinator should manage no more than eight clients and staff.

FY 07 Challenges:

- Transportation continues to be a challenge for clients who work in the community without department support.
- Maintaining reasonable caseload sizes and the increased demand for documentation limits the ability to serve new program participants.
- ECHO, a group employment vendor that provides employment services, is having difficulty finding work sites for the increasing number of clients who need a higher level of support in a group setting.

Program Financial Summary	FY 03 Actual	FY 04 Actual	FY 05 Actual	FY 06 Adopted	FY 07 Adopted
Expenditures					
Personnel	\$929,554	\$1,030,398	\$1,159,165	\$1,373,000	\$1,505,000
Operations & Maintenance	1,056,198	1,058,644	1,253,558	2,017,000	1,535,000
Capital Outlay	0	0	35,004	0	0
Total Expenditures:	\$1,985,752	\$2,089,042	\$2,447,727	\$3,390,000	\$3,040,000
Revenue					
Local Fees, Charges, Etc	\$153,386	\$184,104	\$214,406	\$193,000	\$213,000
Commonwealth	26,237	51,625	46,049	29,000	68,000
Total Revenues:	\$179,623	\$235,729	\$260,455	\$222,000	\$281,000
Local Tax Funding:	\$1,806,129	\$1,853,313	\$2,187,272	\$3,168,000	\$2,759,000
FTE Summary:	20.32	20.79	25.65	23.65	23.65

MH/MR/SAS - MR Employment and Day Support Services

Planned Accomplishments/Objectives for FY 07

Goal: Meet the employment needs of eligible Loudoun County residents with disabilities.

Objective: Provide effective employment services to eligible applicants.

<i>Performance Measures</i>	Actual FY 04	Actual FY 05	Est. FY 06	Proj. FY 07
Number of people served: percentage of eligible people requesting services who receive services.	140/100%	164/100%	180/100%	185/95.6%
Average hourly earnings in group employment.	N/A	\$0.90	\$0.92	\$0.92
% of employed clients in individual supported employment working for 90 days or more.	N/A ¹	N/A ¹	78%	78%

¹First measured in FY 06.

MH/MR/SAS - MR Community Support Services

DESCRIPTION

MR Community Support Services are provided through Adult Foster Care, Respite Care, Family Support, In-Home Support Services, and Consumer Directed Services. Services are designed to meet the assessed needs and desires of each client.

The Adult Foster Care program provide clients with the opportunity to live in a family environment. This alternative is available to clients that require moderate personal care, and have moderate behavioral and medical needs. Potential families are screened and trained to become approved providers. Providers and clients are then matched through interviews and visits. Families are paid a monthly stipend of \$1,300 a month with part of the stipend being paid by the client. In-Home Support staff work one-on-one with clients using individualized plans designed by the client and family to meet specific needs. Services include training, supervision, community integration, and personal care. Medicaid provides funding for these services. Respite Care provides families with a temporary break from the responsibility of being a caregiver. Contracted providers are screened and trained and then referred to families. Families hire providers to take care of the client in their home for an agreed-upon fee.

Family Support assists families with costs related to the care of a disabled adult or child at home. Families can be reimbursed for the cost of equipment, supplies, medical care, and respite care. Consumer Directed Services empowers clients and families to hire and supervise their own support providers. Clients are able to receive respite, personal care, or companion services. Providers are paid directly by Medicaid.

FY 07 Issues:

- No additional Medicaid Waiver slots are expected in FY 06.
- There has been an increase in the number of people needing in-home services, which increases time on a wait list. There are no private vendors providing this service in Loudoun County at the present time.
- The department has experienced difficulty recruiting qualified applicants to staff this program.

FY 07 Challenges:

- Recruitment of qualified staff and contracted providers (In-Home Support/Adult Foster Care/ Respite) is an ongoing challenge.
- Finding families willing to participate in the Adult Foster Care Program by housing and assisting a consumer continues to be difficult.

Program Financial Summary	FY 03 Actual	FY 04 Actual	FY 05 Actual	FY 06 Adopted	FY 07 Adopted
Expenditures					
Personnel	\$453,144	\$385,501	\$454,402	\$819,000	\$739,000
Operations & Maintenance	146,429	127,444	108,548	175,000	157,000
Capital Outlay	0	0	0	40,000	0
Central Vehicle Fund	0	0	31,994	0	0
Total Expenditures:	\$599,573	\$512,945	\$594,944	\$1,034,000	\$896,000
Revenue					
Local Fees, Charges, Etc	\$176,280	\$141,983	\$126,210	\$342,000	\$118,000
Commonwealth	65,201	68,481	59,124	70,000	70,000
Total Revenues:	\$241,481	\$210,464	\$185,334	\$412,000	\$188,000
Local Tax Funding:	\$358,092	\$302,481	\$409,610	\$622,000	\$708,000
FTE Summary:	22.09	10.89	8.00	14.50	12.50

MH/MR/SAS - MR Community Support Services

Planned Accomplishments/Objectives for FY 07

Goal: Provide eligible individuals an opportunity to live in a family environment.

Objective: Recruit three new Adult Foster Care families.

<i>Performance Measures</i>	Actual FY 04	Actual FY 05	Est. FY 06	Proj. FY 07
# of current Adult Foster Care Families/# of Adult Foster Care Families recruited.	3/0	2/2	4/3	4/6
# of marketing contacts made for Adult Foster Care Providers	N/A	N/A	30	30

Goal: Increase the Respite Care program's ability to meet the increasing need for respite in the home.

Objective: Recruit three new respite care providers.

<i>Performance Measures</i>	Actual FY 04	Actual FY 05	Est. FY 06	Proj. FY 07
% of respite requests met	N/A	N/A	90%	90%
# of requests for respite services	N/A	N/A	60	80
# of current Respite Providers/# of recruited Respite Providers	N/A	N/A	2/3	2/3
# of marketing contacts made for Respite Providers	N/A	N/A	10	20

Goal: Reduce the wait list for In-Home Support Services.

Objective: Serve four more people through the In-Home Support Program.

<i>Performance Measures</i>	Actual FY 04	Actual FY 05	Est. FY 06	Proj. FY 07
# of people receiving Medicaid Waiver In-Home Support/# of people requesting Medicaid Waiver In-Home Support	7/57	9/55	14/44	20/58

MH/MR/SAS - MR Community Support Services

Planned Accomplishments/Objectives for FY 07 - Continued

Goal: Provide In-Home Support services so individuals can remain at home as opposed to more restrictive environments.

Objective: Design services to meet the individual needs of the client in the home.

<i>Performance Measures</i>	Actual FY 04	Actual FY 05	Est. FY 06	Proj. FY 07
# of individuals served who are able to remain at home/# of individuals served who required a more restrictive setting	9/0	9/1	14/0	16/0

Goal: All clients will have access to the community during In-Home Support service hours.

Objective: All individual service plans will include participating in the community.

<i>Performance Measures</i>	Actual FY 04	Actual FY 05	Est. FY 06	Proj. FY 07
# of individuals served who are able to access the community/# of individuals served who are not able to participate in the community	9/0	10/0	14/0	14/0

Goal: Provide more autonomy for families through Consumer Directed Services.

Objective: Provide support which will assist families to use these services.

<i>Performance Measures</i>	Actual FY 04	Actual FY 05	Est. FY 06	Proj. FY 07
# of families enrolled in Consumer Directed Services	11	20	24	30

MH/MR/SAS - MR Group Home Services

DESCRIPTION

This program provides training, supervision and assistance with activities of daily living and opportunities for community access, based on the needs and desires of each resident. The MR Group Home system is a mix of County-owned and operated and private vendor-operated residences. The group home team develops and implements an individualized service plan with input from the individual resident, family and/or guardian, and friends, while providing coordination of all medical, behavioral, mental health and therapeutic services as needed. Each program is operated 24 hours a day, seven days a week. Much of the funding for the MR group home system comes from the Medicaid Home and Community Based Waiver program (Medicaid Waiver).

FY 07 Issues:

- With the growth of the population needing services, there is a greater need for 24-hour supported housing. As the demand increases, the waiting list grows as does the length of time spent on the list.
- Changes in the distribution of Section 8 vouchers for people with Medicaid Waiver, which allow individuals to rent their own apartment, have made it difficult for individuals to obtain housing on their own. Therefore they rely even more on the department's services.
- By assisting people with severe disabilities to establish community relationships, the consumer's quality of life is improved by creating bonds in the community. This process also increases the community's ability to value disabled individuals as citizens and neighbors.

FY 07 Challenges:

- The quality of life for group home residents will be enhanced without adding to program costs by establishing natural supports in the community for people with severe disabilities.
- The department will maximize county revenues by increasing the current level of Medicaid Waiver billing through the installation of a new client billing system.
- Skill levels of staff will be improved through ongoing training.

Program Financial Summary	FY 03 Actual	FY 04 Actual	FY 05 Actual	FY 06 Adopted	FY 07 Adopted
Expenditures					
Personnel	\$2,159,092	\$2,336,412	\$2,543,519	\$3,458,000	\$3,669,000
Operations & Maintenance	638,460	676,373	788,872	990,000	964,000
Central Vehicle Fund	0	0	40,098	0	0
Total Expenditures:	\$2,797,552	\$3,012,785	\$3,372,489	\$4,448,000	\$4,633,000
Revenue					
Local Fees, Charges, Etc	\$1,327,250	\$1,400,109	\$1,370,098	\$2,142,000	\$2,131,000
Commonwealth	351,730	344,705	421,514	409,000	279,000
Federal	0	0	6,440	0	0
Total Revenues:	\$1,678,980	\$1,744,814	\$1,798,052	\$2,551,000	\$2,410,000
Local Tax Funding:	\$1,118,572	\$1,267,971	\$1,574,437	\$1,897,000	\$2,223,000
FTE Summary:	46.79	47.79	60.48	62.85	60.92

MH/MR/SAS - MR Group Home Services

Planned Accomplishments/Objectives for FY 07

Goal: Reduce the amount of time spent on the immediate need wait list.

Objective: Reduce immediate need wait time from 4.5 to 4 years.

<i>Performance Measures</i>	Actual FY 04	Actual FY 05	Est. FY 06	Proj. FY 07
Average number of years individuals wait for service	4.5	4.5	4	4
# of clients being served in MR Group Home Services (including vendor services)	44	48	56	56

Goal: Recover billable Medicaid Waiver Revenue.

Objective: MR Residential group homes will recover 95% of hours billed to Medicaid.

<i>Performance Measures</i>	Actual FY 04	Actual FY 05	Est. FY 06	Proj. FY 07
% of Medicaid money reimbursed compared to billed amount	98%	96%	96%	96%

Goal: Increase the quality of life in MR Group Homes through the development of natural supports in the community

Objective: Support clients in developing relationships with people in the community.

<i>Performance Measures</i>	Actual FY 04	Actual FY 05	Est. FY 06	Proj. FY 07
# of individuals that have natural supports/total # of individuals	N/A	12/26	15/32	20/32
% of individual ISP objectives met related to community inclusion	N/A	N/A	95%	95%

MH/MR/SAS - Parent Infant Education (PIE)

DESCRIPTION

PIE is mandated to provide or make available the 17 early intervention services listed in the Federal Law, Part C of the Individuals with Disabilities Education Act to infants and toddlers aged 0-3 and their families. These services include but are not limited to occupational therapy, physical therapy, special instruction, vision services, nursing services, service coordination, and family training via counseling and home visits. PIE directly provides speech, occupational and physical therapy, as well as special instruction to parents. Vision and nutrition services are provided through contracts. Each eligible child and family has an Individualized Family Service Plan (IFSP) developed by a team, which includes therapists and the family. This plan delineates services that are necessary to assist that child and family in achieving the outcomes and priorities determined by the families. Services are provided in the child's natural environment (home, daycare setting), with emphasis on training the primary caregivers on strategies to promote that child's development to the maximum extent possible. Most of the referrals to the PIE program come from physicians but other sources include Health Services, Social Services, and private providers.

FY 07 Issues:

- One of the fastest growing segments of the population continues to be the 0-3 year old age group. Loudoun continues to have one of the highest birth rates in Virginia.
- Families are requesting more specialized services and the PIE program is working very hard to meet the needs with existing staff or through contractual relationships with service providers.
- Services must be provided in a timely manner and the program is required to meet a number of guidelines for service provision and documentation. PIE strives to provide quality services that impact the development of the children served and enhance the ability of parents to deal with their children's disabilities.

FY 07 Challenges:

- The ongoing challenge with early intervention is having the resources necessary to meet the demand. While the State is mandated to fund these services, adequate State resources have not been forthcoming.
- The number of referrals continues to increase but resources are not increasing at the same pace.
- Staff is serving an increased number of children with more complex needs who require more involvement by staff, challenging available resources.
- Compliance with the 45 day Federal mandate to provide Individualized Family Service Plans while experiencing increasing demand continues to be a challenge.

Program Financial Summary	FY 03 Actual	FY 04 Actual	FY 05 Actual	FY 06 Adopted	FY 07 Adopted
Expenditures					
Personnel	\$661,627	\$798,107	\$859,509	\$1,111,000	\$1,216,000
Operations & Maintenance	\$93,037	\$90,200	89,897	\$83,000	132,000
Total Expenditures:	\$754,664	\$888,307	\$949,406	\$1,194,000	\$1,348,000
Revenue					
Local Fees, Charges, Etc	\$139,188	\$159,732	\$142,515	\$133,000	\$143,000
Commonwealth	3,125	3,125	0	3,000	89,000
Federal	212,742	298,320	166,070	270,000	234,000
Total Revenues:	\$355,055	\$461,177	\$308,585	\$406,000	\$466,000
Local Tax Funding:	\$399,609	\$427,130	\$640,821	\$788,000	\$882,000
FTE Summary:	10.00	11.00	13.00	14.00	14.00

MH/MR/SAS - Parent Infant Education (PIE)

Planned Accomplishments/Objectives for FY 07

Goal: Comply with the Federal guidelines for the development of Individualized Family Services Plan (IFSP) as required.

Objective: 100% of eligible families will have IFSP developed within 45 days of referral.

<i>Performance Measures</i>	Actual FY 04	Actual FY 05	Est. FY 06	Proj. FY 07
% of children receiving services within 45 day mandate	0%	90%	95%	95%

Goal: Meet the needs of all eligible children referred to the PIE Program.

Objective: 100% of children will receive services on IFSP.

<i>Performance Measures</i>	Actual FY 04	Actual FY 05	Est. FY 06	Proj. FY 07
% of children receiving all services listed on IFSP	N/A	N/A	100%	100%
Total # of children who request PIE services	439	496	525	560
Number of children receiving ongoing services	264	300	345	360

Goal: Minimize the effects of disabling conditions on children in the PIE Program.

Objective: Increase by 2% the number of children who go on to school system who do not require special education pre-school program (currently 18%).

<i>Performance Measures</i>	Actual FY 04	Actual FY 05	Est. FY 06	Proj. FY 07
% of children who require special education pre-school upon discharge from PIE program	N/A	18%	20%	22%

MH/MR/SAS - Administration

DESCRIPTION

MHMRSAS Administration provides direction and support for all department activities. Activities include policy development and implementation, capital planning and acquisition, human resources, customer service, financial management, information systems, facility management, program development and support, quality assurance and compliance with regulatory requirements (HIPAA, Human Rights, OSHA, and State licensure). In addition, administration provides support to the Community Services Board.

FY 07 Issues:

- The growth in consumers, agencies and program sites causes pressure on the division to maintain effective administrative services.
- Improved access to timely and accurate data from the current data systems is needed for strategic planning, program management, quality assurance, and utilization review.
- The ability to maximize revenue while meeting the increasingly complex requirements of Medicaid and other third party payers is difficult with the current data system.
- The need to provide quality of information to the CSB to enable members to make informed decisions is imperative.

FY 07 Challenges:

- This division has the responsibility for the assurance of compliance with new and evolving regulations regarding service provision, report generation, and other medical/legal issues.
- Enhancement of the current information system to allow for efficient and effective access to data by both management and line staff will be addressed with the installation of a new data system.
- The new information system will assure accurate and timely submission of billing and other reports for third party payers.
- The division will endeavor to fill licensed clinician vacancies in order to improve third party revenue collections.

Program Financial Summary	FY 03 Actual	FY 04 Actual	FY 05 Actual	FY 06 Adopted	FY 07 Adopted
Expenditures					
Personnel	\$3,092,725	\$3,067,545	\$3,022,289	\$3,064,000	\$3,492,000
Operations & Maintenance	313,343	220,221	115,737	169,000	233,000
Capital Outlay	5,319	0	0	0	0
Total Expenditures:	\$3,411,387	\$3,287,766	\$3,138,026	\$3,233,000	\$3,725,000
Revenue					
Local Fees, Charges, Etc	\$0	\$6,751	\$0	\$0	\$0
Federal	411,491	193,771	1,000	0	0
Total Revenues:	\$411,491	\$200,522	\$1,000	\$0	\$0
Local Tax Funding:	\$2,999,896	\$3,087,244	\$3,137,026	\$3,233,000	\$3,725,000
FTE Summary:	50.32	51.32	51.32	45.42	49.22

MH/MR/SAS - Administration

Planned Accomplishments/Objectives for FY 07

Goal: Facilitate client access to clinical and rehabilitation services through Administrative support functions.

Objective: Provide timely and effective customer service as demonstrated by receiving an 85% or better on customer satisfaction surveys.

	Actual FY 04	Actual FY 05	Est. FY 06	Proj. FY 07
<i>Performance Measures</i>				
#/% of requests for releases of information and court orders for records delivered within required time frame	155/80%	176/81%	185/85%	185/85%
# of community presentations coordinated/presented by the Community Resource Center	17	33	35	35
% of admission confirmation packets prepared and sent within 24 hours	N/A	95%	95%	95%
% of MH/SAS customer satisfaction surveys at the very satisfied or mostly satisfied levels	N/A	85%	85%	85%

Goal: Maintain regulatory compliance with HIPAA, Human Rights, OSHA, and State licensure.

Objective: Through quality assurance activities such as training, inspections, site visits and health care record reviews, improve safety, security and confidentiality of clients, staff and information.

	Actual FY 04	Actual FY 05	Est. FY 06	Proj. FY 07
<i>Performance Measures</i>				
# of inspections completed	N/A	12	30	30
# of remediation plans developed	N/A	12	30	30
#/% of staff trained within 30 days of employment	N/A	65%	75%	80%

Goal: Maintain accurate and accessible data systems that allow for meaningful report generation.

Objective: Meet deadlines established by regulatory agencies for mandatory reporting.

	Actual FY 04	Actual FY 05	Est. FY 06	Proj. FY 07
<i>Performance Measures</i>				
# of active client records processed	4,363	4,645	4,500	4,500
% of Community Consumer Submission (CCS) reports submitted on time to the State	N/A	95%	95%	95%

MH/MR/SAS - Administration

Planned Accomplishments/Objectives for FY 07 - Continued

Goal: Provide timely, effective and sound financial management.

Objective: Maximize revenue and effectively manage expenditures.

<i>Performance Measures</i>	Actual FY 04	Actual FY 05	Est. FY 06	Proj. FY 07
# of data entry transactions entered relevant to revenue generation	219,350	231,680	251,768	266,768
% of total billed charges collected	86%	83%	86%	86%